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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. First Inventor Title

MICHALAKIS SAVVA CATIONIC LIPPOS FOR NUCLEIC ACLO DELIVERY Express Mail Label No.

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450						
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification [Total Pages 2] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description			7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies							
		na ·			<u> </u>	<u> </u>	LIOA	11011	FARIO	
Prior application information: Examiner				7 CFR 1.76: ation-in-part (CIP) of prior application No.:						
The incorporation	can only be rea	ed upon when a portion has been Inadve			SUDMitteu	1 арриса	tion part	5.		
		IF, CORRESPON	IDENCE A	DUKESS						
Custome	er Number:			OF	₹ 🔯	Согтеѕр	ondenc	e addı	ess below	
Name	MICHALA	KIS SAVVA								
Address	~ . ~	~~~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	•	PT. 38	•	<u> </u>	-			
0''	RACTUE		State	NJ	<u> </u>		Zip C	ode	07204	
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Signature	\ \A11(HALAKIS SAVVA					Date	l IV	114/2003	

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
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FEE TRANSMITTAL for FY 2004

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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

Compl te if Known					
Application Number					
Filing Date					
First Named Inventor					
Examiner Name					
Art Unit					
Attorney Docket No.					

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:	Large Entity Small Entity					
Deposit Account.	Fee Code	Fee (\$)		Fee (\$)	Fee Description	Fac Dald
Account Number	1051	130	2051		Surcharge - late filing fee or oath	Fee Paid
Deposit	1052	50	2052		Surcharge - late provisional filing fee or	
Account Name					cover sheet	
The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification For filing a request for <i>ex parte</i> reexamination	
Charge fee(s) indicated below Credit any overpayments	1812	•	1812	_,		
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920"	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC FILING FEE Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1001 770 2001 385 Offility filing fee 385 1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402		Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 385	1452	110	2452	55	Petition to revive - unavoidable	
	1453	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	
Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee	
Total Claims20** = X =	1503	640	2503	320	Plant issue fee	
Claims - 3** = X = = Multiple Dependent	1460	130	1460	130	Petitions to the Commissioner	
Muldiple Dependent	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	8021	I 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))]
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	examined (37 CFR 1.129(b)) Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	• • • • • • • • • • • • • • • • • • • •	
· · · · · · · · · · · · · · · · · · ·	Other fee (specify)					
SUBTOTAL (2) (\$)	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)					
**or number previously paid, if greater; For Reissues, see above	ŀ				σσστστημε (σ) (ψ)	

SUBMITTED BY	(Complete ((Complete (if applicable))			
Name (Print/Type)	MICHALAKIS SAVYA	Registration No. (Attomey/Agent)	Telephone	908 259 0566	
Signature	House		Date	10/4/2003	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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Michalakis Savva 240 West Sumner Avenue Apt. 38 Roselle Park, NJ 07204, USA

14/10/2003

Commissioner for patents, P.O.Box 1450, Alexandria, VA 22313-1450.

Dear Sir/Madam

Enclosed please find the following material for **TWO** non-provisional patent applications. The titles of which are "Single-component pH-sensitive liposomes of reduced solid-to-liquid phase transition temperatures" and "Cationic lipids for nucleic acid delivery".

- 1) form PTO/SB/01
- 2) form PTO/SB/05
- 3) form PTO/SB/17
- 4) specification that includes a) title of the invention
 - b) background of the invention
 - c) summary of the invention
 - d) description of figures
 - e) description of the invention
 - f) claims
 - g) abstract
- 5) two checks, each for \$385.00.

Sincerely,

Michalakis Savva